

Affiliate Annual Report Form

Submit this form to your Regional Director and the NEAFCS National Office, 325 John Knox Rd. Suite L103 Tallahassee, FL 32303 Fax: (850) 222-3019 Email: djessup@executiveoffice.org

Please return this form by December 31st of each year to your Regional Director and a copy to the National Office. This report should cover anything that has occurred between January 1 and December 31 of the current year.

State/Territory:	Oregon Mandy Hatfield					12/27/2023 541-236-3017
Person Completing Form:						
What accomplishments/pr and recognition, public affair Oregon started the year off submissions with eight awar national award. The Oregon and Family and Community created through the thought	rs, etc.) with many submi rds. Of the eight n affiliate was ab Health faculty ar	issions to the im awards seven rule to provide sor nd staff were abl	pact reports. Thi eceived regional ne fun inclusive f	is was follow awards and fundraising a	ed by a one rec ctivities	great turnout for awards eived a first-place that all state SNAP-Ed
What are your Affiliate's g Oregon is scheduled to do a sessions are in the Western see many proposals and aw	thorough bylaw Region this year	rs review and upor r we are encoura	aging as many m			
What challenges do Coope			-			

To assist NEAFCS in future planning and communication, please list concerns your Affiliate has for the NEAFCS Board to address:

don't have funding to have FTE provide to each county to reach the whole state population with the information. Oregon

is working on expanding its trained volunteer, staff, and faculty to increase programming in the state.